



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)		
AOJI ISONO ET AL.		:	Examiner: P. Dharia	
•		:	Group Art Unit: 2673	
Application No.: 09/719,523)		RECEIVED
Filed: March 29, 2001)		OCT 0 6 2003
For:	METHOD OF CONTROLLING	:	•	
1 01.	IMAGE DISPLAY	;	Sept. 29, 2003	Technology Center 2600

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

RESPONSE TO ELECTION-OF-SPECIES REQUIREMENT AND SECOND PRELIMINARY AMENDMENT

Sir:

In response to the Office Action dated August 27, 2003, Applicants elect to proceed with the prosecution of Species 2, shown in Figures 4-9, on which Claims 34-51 read. The claims are reflected in the listing beginning at page 2. The Remarks begin at page 11.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

September 29, 2003
(Date of Deposit)

LEONARD P. DIANA (Reg. No. 29,296)

(Name of Attorney for Applicant)

September 29, 2003

Signature

Date of Signature



Docket No. 00862.021692.

AOJI ISONO ET AL.

Application No.: 09/719,523

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IMAGE DISPLAY

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Sir:

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Technology Center 2600

Transmitted herewith is a Response in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	** 51	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 12	MINUS	***	0	x \$42 \$84	\$0
Fee for Multiple Dependent claims \$140°/\$280						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						\$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

•	
	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicants
	Registration No. 29 29C

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

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